FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATIOI	N	
1 Olliw 1	(See instructions)		Office use only
NAME OF COMMITTEE (in f	(Check if name Exam is changed) over t	nple: If typying, type the lines 12FE4M	5
NiSpurce Inc. I	PAC		
سسسسا			
ADDRESS (number and s	treet) 200 Civic Center Drive		
(Check if address is changed)			
	Columbus	OH)	43215 -
	CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	_ ADDRESS (Please provide only one e-mail addre	ess)	
(Check if address is changed)			
COMMITTEE'S WEB I (Check if address is changed)	PAGE ADDRESS (URL)		
2. DATE 0.4	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	TION NUMBER C COOK	051979	
4. IS THIS STATEM	ENT NEW (N) OR X	AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and	d belief it is true, correct and complete	
	Treasurer Timothy J. Tokish, Jr.		
Type or Print Name of	reasurer		
Signature of Treasurer	Electronically Filed by Timothy J. Tokish	, Jr. Date 0	3 26 Y 2009
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the		
Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)